

Permit #: 20090

Date Issued: 12-28-95

County: Butte

Date Cancelled: _____

CONFIDENTIAL UNTIL: _____

Date Plugged: 3-8-96

COMMENTS:

O&G FORMS	Date Received
1	
2	
3	12-28-95
3i	
4	
4i	
5	
6	
7	4-5-96
8	
11	
12	
Misc. Form 2	

	TYPE	ID #	Date Received
Logs			
Samples	chip		
	core		
Analyses	water		
	core		
Additional Submitted Data:			

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL ☒DEEPEN ☐PLUG BACK ☐for an oil well ☐or gas well ☐Hydrocarbon Test ☒NAME OF COMPANY OR OPERATOR TOWN OIL COMPANYDATE 12-28-9516205 W. 287th StPaolaKansas 66071

Address

City

State

DESCRIPTION OF WELL AND LEASE

Name of lease

Hess

Well number

11

Elevation (ground)

875

WELL LOCATION

2170

ft. from (N) (S) sec. line

(give footage from section lines)

2590

ft from (E) (W) sec. line

WELL LOCATION

Section 8Township 39NRange 33W

County

BatesNearest distance from proposed location
to property or lease line:N/A feetDistance from proposed location to nearest drilling,
completed or applied for well on the same lease:N/A feet

Proposed depth:

75'

Drilling contractor, name & address

Town Oil Co.

Rotary or Cable Tools

Rotary

Approx. date work will start

12-29-95

Number of acres in lease:

130Number of wells on lease, including this well,
completed in or drilling to this reservoir: 0Number of abandoned wells on lease: 0If lease, purchased with one or more
wells drilled, from whom purchased:Name N/A

Address _____

No. of Wells:

producing 0injection 0inactive 0abandoned 0

Status of Bond

Single Well ☐ Amt. _____Blanket Bond ☒Amt. \$60,000☒ ON FILE
☐ ATTACHEDRemarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present
producing zone and expected new producing zone) use back of form if needed.N/A

Proposed casing program:

N/A

amt.

size

wt./ft.

cem.

Approved casing -- To be filled in by State Geologist

N/A

amt.

size

wt./ft.

cem.

I, the undersigned, state that I am the Partner of the Town Oil Co. (company),
and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and
that the facts stated therein are true, correct and complete to the best of my knowledge.

Signature

Lulu TownPermit Number: 20090Approval Date: 12/28/95Approved By: James Holly Williams (HWS)☒ Drillers log required☒ E-logs required if run☒ Core analysis required if run☒ Drill stem test info. required if run☐ Samples required☐ Samples not requiredNote: This Permit not transferable to any other
person or to any other location.

Remit two copies to: Missouri Oil and Gas Council
P.O. Box 250 Rolla, Mo. 65401
One will be returned for driller's signature

WATER SAMPLES REQUIRED ☐

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the
proposed well nor endorsement of the qualifications of the permittee.



MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI OIL AND GAS COUNCIL
PLUGGING RECORD

FORM OGC-7

OWNER Town Oil Co.		ADDRESS 16205 W. 287 St. Paola, KS. 66071			
NAME OF LEASE Hess		WELL NUMBER 11	PERMIT NUMBER (OGC-1 OR OGC-2) NUMBER 20090		
LOCATION OF WELL 2170' FNL 2590' FEL		SEC-TWP-RNG OR BLOCK & SURVEY 8-39N-33W	COUNTY Bates		
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF Town Oil Co.		HAS THIS WELL EVER PRODUCED OIL OR GAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBLS/DAY) N/A GAS (MCF/DAY)	DRY?	
DATE ABANDONED 3-8-96	TOTAL DEPTH 70	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) GAS (MCF/DAY) N/A		WATER (BBLS/DAY)	
Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment. N/A		Fluid content of each formation		Depth interval of each formation	Size, kind, & depth of plugs used, giving amount cement.
					2 sacks cement
SIZE PIPE N/A	PUT IN WELL (FT)	PULLED OUT (FT)	LEFT IN WELL (FT)	GIVE DEPTH AND METHOD OF PARTING CASING (SHOT, RIPPED, ETC.)	PACKERS AND SHOES
WAS WELL FILLED WITH MUD-LADEN FLUID?		INDICATE DEEPEST FORMATION CONTAINING FRESH WATER			
NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE					
NAME		ADDRESS		DIRECTION FROM THIS WELL	
N/A					
METHOD OF DISPOSAL OF MUD PIT CONTENTS N/A					
NOTE FILE THIS FORM IN DUPLICATE WITH (USE REVERSE SIDE FOR ADDITIONAL DETAIL)					
CERTIFICATE I, the undersigned, state that I am the <u>Partner</u> of the <u>Town Oil Co.</u> (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.					
SIGNATURE <i>Ruth Town</i>				DATE 4-3-96	

[illegible]

* Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

This Well Completion or Recompletion report and well log shall be filed with the Missouri State Geologist not later than 30 days after project completion.